# THE MEIGHBORHOOD EMERGENCY METWORK

## A Public Safety Partnership for Lexington - Fayette County

## Volunteer Participation and Waiver Form

This is the volunteer participation and waiver form for the Neighborhood Emergency Network (NET) sponsored by the LFUCG Division of Environmental and Emergency Management (DEEM). If you are interested in joining this effort, please fill it out and return it to DEEM at 166 N. Martin Luther King Blvd, Lexington, Kentucky 40507. You can also call (859) 258-3784 or contact your local neighborhood association.

The NET has been established to better meet the needs of Lexington citizens when natural disasters or other emergencies occur. When they do, many people spontaneously volunteer to help their neighbors, especially if there is no way of getting immediate assistance. People are also interested in helping the LFUCG with response and relief operations. NET helps prepare volunteers to act in a safe and effective manner and formalizes the use of volunteers by the LFUCG during disasters.

### **Contact Information**

Please fill in the spaces below. Note that all information will be kept private by the LFUCG and will not be given to other entities. It will only be used to notify you of volunteer opportunities, disaster alerts, and activations.

Name	
Mailing Address	
Email Address	
Telephone Number	
Cell Number	
Special needs (if any)	
Special skills or abilities that may be useful during a natural or manmade disaster.	

#### Volunteer Activities

Please check the appropriate boxes for the following activities that you are interested in volunteering for. Please note that signing this form does not commit you to participating or providing any service.

- □ Volunteer to serve on the NET steering team. The group meets to develop and implement this program in Lexington-Fayette County.
- □ Volunteer to assist DEEM with conducting a neighborhood survey of hazards, emergency resources, and persons with special needs during disasters.
- □ Volunteer to represent my neighborhood as an emergency contact as part of the NET's communication network. During disasters, these contacts will be notified and possibly asked to disseminate information to their neighbors.
- Volunteer to provide status reports to the LFUCG emergency operations center during disasters.
- □ Volunteer to attend forums conducted by local officials on severe storm safety, homeland security, and disaster resistance efforts in our community.
- □ Volunteer to attend basic disaster safety training or help organize a "Community Emergency Response Team" in my neighborhood.
- Volunteer in community disaster drills sponsored by the LFUCG.
- □ Volunteer to assist emergency response agencies during disasters.

## Volunteer Participation Form

## Terms of Participation

By volunteering to join the Neighborhood Emergency Network (NET) program and signing below, the volunteer acknowledges and fully understands the following terms of participation:

- The NET provides disaster volunteer and training opportunities for Fayette County residents. However, it is important to note that NET volunteers do not replace police, fire, emergency medical services, or other response agencies. These agencies should always be contacted immediately during any life-threatening emergency. When it is necessary to help someone, volunteers should always exercise caution, especially if they may also be in danger. Further, volunteers should only perform lifesaving measures (like first aid) if they have proper training or certification.
- All persons volunteering to participate in NET-related training or who serve as neighborhood emergency
  contacts must first sign this waiver below. Note that all participants are provided with legal protections from
  civil liabilities pursuant to the Volunteer Protection Act of 1997 (Title 42 U.S.C. § 14501 et seq).
- The NET program is a purely voluntary activity. No person is required to participate. Neighborhood associations, the LFUCG, citizens, or other participants do not legally commit themselves to performing any of the services stated in the previous section. Any volunteer or organization can end their involvement at any time with written notice.
- The NET program is *free to the public*. Neighborhood associations or individual volunteers do not pay fees to participate, with the exception of any special training opportunities offered that may require a fee.
- No neighborhood association or citizen is required to divulge any information to the LFUCG or neighborhood associations. All information will be kept private and used only by the LFUCG and only for disaster preparedness and response.
- For the purpose of this program, the LFUCG normally functions as an advisor and informer. This includes providing neighborhood associations with emergency notifications and making instructors and materials available for safety training. As such, neighborhood associations or trainers are the instrumentalities for all training for the purposes of this program.

## Volunteer Waiver

In order to participate in any NET activities, training, or disaster activations, volunteers must first read and sign the following waiver:

#### **KNOW ALL MEN BY THESE PRESENTS**

That the undersigned, having requested permission to participate and having voluntarily agreed to participate in the Neighborhood Emergency Network program, for and in consideration of having granted such permission, voluntarily assumes any risk of injury that may arise out of his or her participation in said activity.

The undersigned further acknowledges and fully understands all terms of participation stated on this form and that this activity involves risk of serious injury, including permanent disability and death, and being advised that the Lexington-Fayette Urban County Government assumes no responsibility for any injury or damages which may result to the undersigned by reason of his or her being granted such permission does hereby release and forever discharge the Urban County Government, it's representatives, supervisors and employees, from any claims, demands, damages, injuries or causes of action whatsoever which may arise as a result of the undersigned being granted permission to participate in said activity.

The undersigned further states that he or she is in good physical condition and has no disease or injury that would keep the participant from participation, and understands that the Urban County Government provides no medical insurance coverage.

insurance coverage.	ic orban county coverni	nent provides	no medical
IN WITNESS WHEREOF, the undersigned has hereunto place	day of	, 20	
Valuntoor	DEEM Witness		
Volunteer	DEEM Withess		